ISSUE CLIP STAPLE AREA (for additional cross references) ID NO. POSITION INITIALS DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER FORMALITY REVIEW 102-6 INDEX OF CLAIMS Rejected ..... Non-elected Allowed . Interference (Through numeral) Canceled Appeal ..... Restricted ..... Objected Date Date Final Original Final Original 9 V V V 10 V V V 11 V V V 13 V V V 14 V V V 15 V V V 17 V V V 18 V V V 20 V V (21 V V V 22 V V V 32 1 34 V V If more than 150 claims or 10 actions staple additional sheet here

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